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PRESS
KIT

Lee JB


PARKE-DAVIS

1866 · 1966

100th

ANNIVERSARY

BETTER MEDICINES FOR A BETTER WORLD



FROM -
Parke, Davis & Company, Ltd.
5910 Côte de Liesse Road
Montreal 9, Quebec, Canada
A/C: 514 - 748-6301

Parke, Davis & Company's administrative headquarters and home laboratories are shown here with downtown Detroit, Michigan in the background.

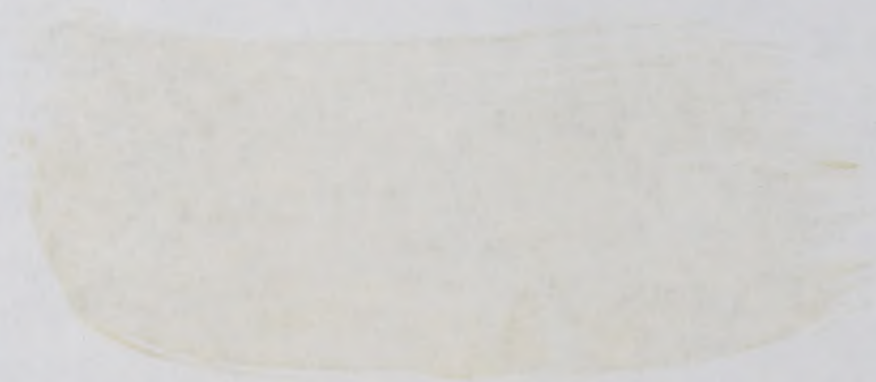
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FROM -
Parke, Davis & Company, Ltd.
5910 Côte de Liesse Road
Montreal 9, Quebec, Canada
A/C: 514 - 748-6031

This building was Parke-Davis' first "home" in Canada. The structure was located in Walkerville, Ontario where the company established its first manufacturing facility outside the United States in 1887. Parke-Davis Canadian manufacturing operations were transferred to Brockville, Ontario in 1956.



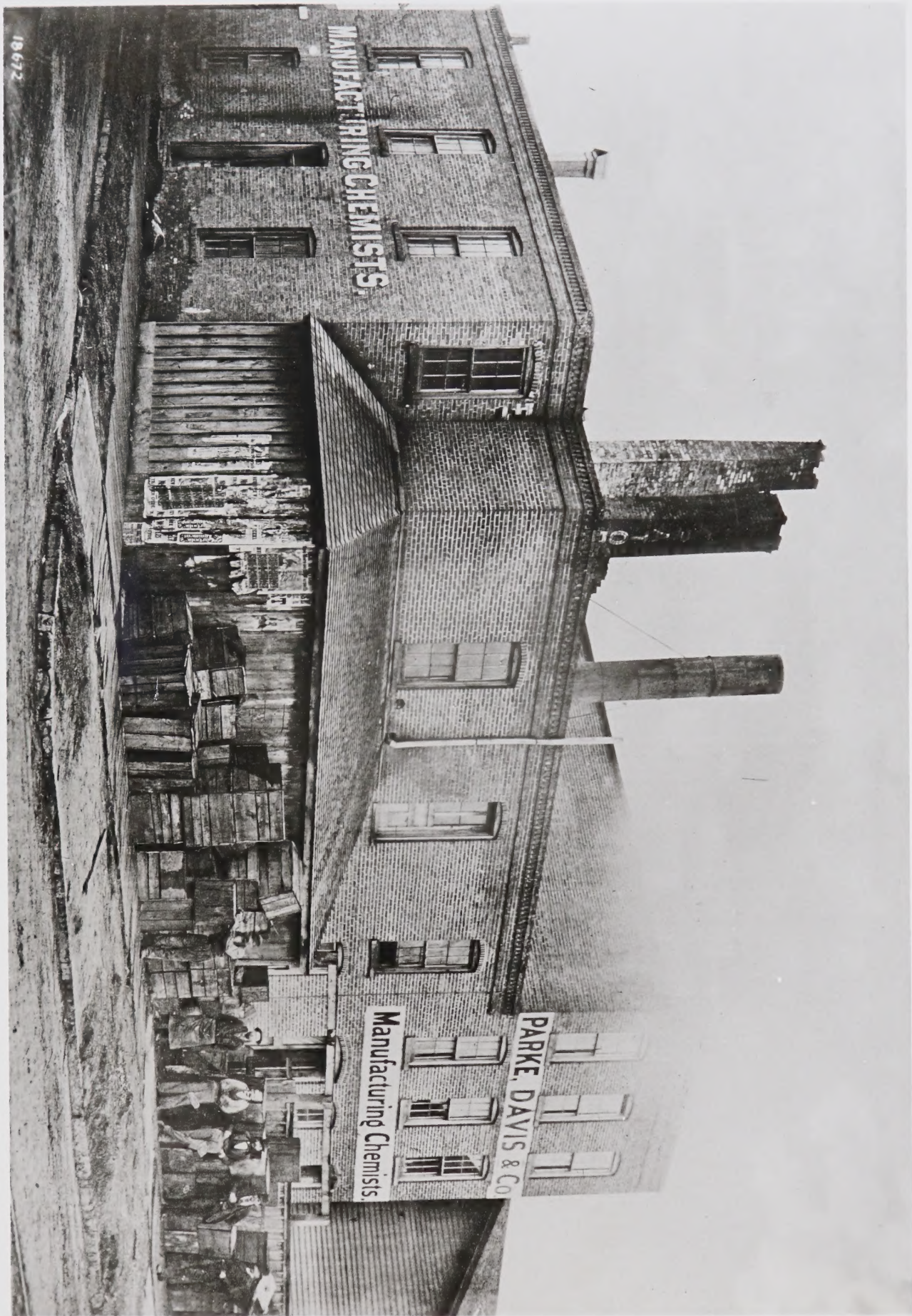



FROM -
Parke, Davis & Company, Ltd.
5910 Côte de Liesse Road
Montreal 9, Quebec, Canada
A/C: 514 - 748-6301

Shown above is the first home of Parke, Davis & Company in Detroit,
Michigan, which dates its founding from 1866.

#

18672






FROM -
Parke, Davis & Company, Ltd.
5910 Côte de Liesse Road
Montreal 9, Quebec, Canada
A/C: 514 - 748-6301

HAROLD W. H. BURROWS
President
Chief Operating Officer
Parke, Davis & Company

#





FROM -
Parke, Davis & Company, Ltd.
5910 Côte de Liesse Road
Montreal 9, Quebec, Canada
A/C: 514 - 748-6301

HARRY J. LOYND

Chairman of the Board
Chief Executive Officer
Parke, Davis & Company

#



FROM -
Parke, Davis & Company, Ltd.
5910 Côte de Liesse Road
Montreal 9, Quebec, Canada
A/C: 514 - 748-6301

HERVEY C. PARKE

Founder and First President of Parke, Davis & Company

#



FROM -
Parke, Davis & Company, Ltd.
5910 Côte de Liesse Road
Montreal 9, Quebec, Canada
A/C: 514 - 748-6301

GEORGE S. DAVIS

One of the founders of Parke, Davis & Company

#



FROM -
Parke, Davis & Company, Ltd.
5910 Côte de Liesse Road
Montreal 9, Quebec, Canada
A/C: 514 - 748-6301

FOR IMMEDIATE USE

1966

MONTREAL -- Parke, Davis & Company, established in a Detroit, Michigan drug store 100 years ago, is today one of the world's largest manufacturers and distributors of pharmaceutical products.

It has plants, branch offices, depots in 30 U.S. and Canadian cities; 57 branches, subsidiaries and sales offices in international areas. Its headquarters and principal manufacturing, engineering and distribution offices are located along the Detroit River. In addition, a 611-acre farm near Detroit is maintained for the development of biological products and virus vaccines; at Holland, Michigan, and Barcelona, Spain, the company operates chemical manufacturing plants; the principal research laboratories are located in Ann Arbor, Michigan, and in Detroit; and surgical dressings are manufactured at a plant in Greenwood, South Carolina.

This world-wide company, which now has approximately 65,000 stockholders with more than 14.5 million shares of common stock outstanding, had its beginning in Dr. Samuel P. Duffield's drug store. It soon developed into a small manufacturing business and on October 26, 1866, founding date of the company, Hervey C. Parke joined forces with Dr. Duffield under the name of Duffield, Parke & Company. George S. Davis joined the enterprise a year later.

Advertised in City Directory

The scope of operations at the time is summed up in an advertisement in the Detroit City Directory which called attention to the company's "ether, sweet spirits of nitre, liquid ammonium, Hoffman's anodyne, etc., mercurial ointment, and blue pill mass, etc. For photographers and physicians our ether is unequalled in purity. List of prices furnished on application."

In 1874, a small manufacturing laboratory was built on the grounds of the present establishment, along the Detroit River. The following year, the business was incorporated in Michigan as Parke, Davis & Company with paid-in capital of \$81,950, and five stockholders.

The following year, with Parke as president and Davis as general manager, the company had net earnings of \$4,139 . . . the first profits ever earned by the company. Parke-Davis' first cash dividend was declared in 1877. The company has continued to regularly pay dividends each year since. The 313th was distributed to stockholders January 30, 1966.

Product Standardization

In 1879, having invested heavily in research, the company made pharmaceutical history with the announcement that a Parke-Davis preparation had been standardized through chemical assay. Early skepticism of this development which assured uniformity in the potency of drugs was soon eliminated as other firms adopted standardization methods of their own.

In 1881, Parke-Davis established its first sales branch . . . in New York City. As rapidly as the need became evident, branches and depots were established at other major centers in the United States.

Parke-Davis operations were extended abroad in 1887 with establishment of the first manufacturing facilities outside the U.S. at Walkerville, Ontario, Canada. A British branch of Parke-Davis was established at London in 1891 and another in Bombay, India in 1899.

Received Biological License No. 1

Advances in research and development of new products pushed the need for expansion. In 1894, at its headquarters site in Detroit, Parke-Davis established the first biological laboratory in America and shortly thereafter obtained biological license No. 1 from the U.S. Government enabling it to produce a serum for diphtheria.

Parke-Davis also holds biological license No. 1 in Canada. On March 18, 1895, a Detroit physician administered a dose of Parke-Davis diphtheria antitoxin to an ailing company employe, the first commercially produced serum administered to anyone in the U.S.

Davis sold his Parke-Davis holdings and left the company in 1896. He died in 1930. Hervey Parke continued as president after Davis' retirement. Then, in 1899, while on a California business trip, he died, ending the era of Parke and Davis as active managers of their company.

Since the turn of the century, Parke-Davis contributions to the pharmaceutical and medical professions have been significant. The discovery of Adrenalin was the result of study of glandular and hormonal products. The company was a leader in vitamin research. It has developed, in the chemotherapeutic field, drugs for combating syphilis, leprosy, epilepsy; the first antihistamine, Benadryl; and Chloromycetin, the first antibiotic successfully produced entirely by chemical processes.

Products Total Approximately 500

The products of Parke-Davis total about 500 and represent some of the most effective remedial agents used in medicine today.

Few medicinal agents that existed when the company was first organized have survived. And Parke-Davis has played a conspicuous part in the transition of medication from an era of empiricism and guesswork to the use of products of known physiologic action and controlled potency.

From a humble beginning in Detroit 100 years ago, Parke-Davis enters on its 11th decade of service to mankind this year through the continuing research and development of new and better drugs. The well-known company slogan, Medicamenta Vera, is probably the only thing that hasn't changed in the past century at Parke-Davis. Medicamenta Vera - truth in medicine - has been and will continue to be its policy and practice.

FROM -
Parke-Davis & Company, Ltd.
5910 Côte de Liesse Road
Montreal 9, Quebec, Canada
A/C: 514 - 748-6301

FOR IMMEDIATE USE

1966

MOVIE, BROCHURE HIGHLIGHT
CENTENNIAL YEAR FOR PARKE, DAVIS & COMPANY

- - -

MONTREAL -- Parke, Davis & Company, one of the nation's oldest and largest pharmaceutical companies, celebrates its Centennial Year in 1966.

Parke-Davis dates its founding from October 26, 1866, when Hervey C. Parke, a school teacher turned business man, joined forces with Dr. Samuel P. Duffield, a physician who operated a small manufacturing plant, to form Duffield, Parke & Company.

Centennial developments include the production of a new, 29-minute full-color motion picture, "Time for Living." Camera crews covered more than twenty countries on every continent to capture in color the role of Parke-Davis people everywhere and their contributions in research, production, and distribution ... all working toward creating more time for living.

A 60-page commemorative brochure has been published. The brochure concentrates on Parke-Davis today to show the results of the first 100 years and the foundation on which it will build its second century.

The brochure, which makes liberal use of photographs of company operations, details the overall goals of Parke-Davis in the years ahead, tied to the central theme of providing 'better medicines for a better world.'

The monthly International Division Newsletter, Parke-Davis International News, carries monthly installments tracing the history of Parke-Davis.

2 - CENTENNIAL PLANS (Parke-Davis)

Ten issues of the Parke-Davis Review, an employe publication, will contain special editorial inserts each dealing with a decade in the company's history.

Other Centennial features include the design of a special anniversary seal which has been incorporated into flags, plaques, stationery and advertising now being used by the company and its branches throughout the world.

Harry J. Loynd, Chairman of the Board of Parke-Davis, said "our past is a rich heritage, but today our thoughts are focused on meeting the present challenges and seeking out the opportunities of the future."

PARKE, DAVIS & COMPANY

"Better Medicines for a Better World"

— — —

This material is designed for those who
desire information on Parke, Davis &
Company and its current activities.

FORWARD

Evidence of the accelerated pace at which medical science is advancing is the fact that 90 per cent of all scientists who ever conducted research are alive and doing research today.

The benefits are numerous.

Consider, for example, the phenomenal lengthening of the life span. Some 50 years ago, a North American citizen at birth had the prospect of living until 48 years of age. If born today, his life expectancy is nearly 70 years.

At the turn of the century, the big "killers" were pneumonia, influenza, tuberculosis, and "gastritis." Today, these diseases are virtually under control. Between 1930 and 1963, death rates from influenza and pneumonia dropped 64 per cent. Tuberculosis and whooping cough death rates plummeted by 93 per cent and 98 per cent, respectively, and diphtheria death rates fell practically to zero.

Now, too, medical minds are edging closer to the missing parts of the answers to cancer, heart disease, and other degenerative diseases.

The pace of the advance in health in recent years has dramatically quickened. The years of World War II, and since, have marked the greatest medical progress of any comparable period in history. Among the important developments of the war years were penicillin, blood plasma, and new drugs for the control of tropical diseases. Since the war, major results have been the development of new antibiotics; antihistamines to control allergies; isolation and synthesis of steroid hormones which have added to knowledge concerning the chemical control of the body processes; agents to control blood pressure; vaccines against dread diseases like poliomyelitis; and tranquilizers.

Many in medical science, or closely related to it, can share the credit. Not the least is the pharmaceutical industry.

Although pharmacy had its beginnings before the dawn of history, the pharmaceutical industry -- as we know it today -- is young. The United States' Civil War created the need to manufacture medicines in that country in quantities sufficient to supply more than a local need. That lesson, and the combined effect of world wide population increases and the dispersement of people, resulted in the establishment of some of the major pharmaceutical houses which are still in existence.

Perhaps one of the greatest contributions of those pioneer firms before the turn of the century was the development of a method of standardization that assured uniformity in the quality and potency of medical products they produced. In this, Parke, Davis & Company was, and is, a leader.

In the last 50 years, with the demand for better medicines and the development of modern medical science, to which it made major contributions, the drug industry has enjoyed its most important growth. Many of the diseases which were formerly prevalent have been alleviated or eliminated through development of special medication by the industry.

Today, pharmaceuticals are among our continent's fastest-growing major industries.

In Canada alone, there are approximately 171 individual pharmaceutical manufacturers, employing nearly 11,000 persons and with an annual payroll in excess of \$50,000,000, according to the Dominion Bureau of Statistics.

Drug manufacturers distribute their products in this country through the thousands of retail pharmacies and drug wholesalers who supply our nation's estimated 24,000 physicians and 1,100 hospitals.

This is a young and growing industry. Rapid expansion since the Second World War has been marked by the establishment by many companies of extensive manufacturing facilities and research laboratories. By 1965, manufacturing activity had grown to 10 times the 1940 level and 20 times that of 1920. Today about 83% of pharmaceuticals sold in Canada were manufactured in this country.

* * *

One of the leading firms in this increasingly significant industry is Parke, Davis & Company, which this year celebrates its centennial. Also, one of the largest, Parke-Davis has more than 12,700 employees in laboratories and sales offices throughout the world. The general offices, production and engineering, sales and distribution activities are housed in a complex of buildings in Detroit, Michigan along the Detroit River.

Rich in history and accomplishment since its founding in 1866, the emphasis at Parke-Davis is on today and tomorrow.

RESEARCH

Research has the never-ending responsibility of finding and studying promising substances in an effort to produce valuable new medications for the treatment of disease.

One part of research is an operation which can be compared to a series of "sieves" designed to sift out the most promising compounds from thousands of possibilities. In many instances, the kind of "sieve" needed is not known, and research on new methodology is undertaken to determine, if possible, the right type of "sieving" mechanism.

Another important part of research is devoted to studying the nature of diseases in the hope of opening up new avenues of approach to their prevention, treatment, and cure.

After a great deal of highly-skilled experimental work, research decides which few compounds of the many possibilities may be probabilities. Animal tests are used to characterize a compound's biological profile, both from the point of view of potentially useful properties and safety. Only after favorable test results in the laboratory and in animals does the compound go to another research division -- Product Development. Here a specified amount of the new product is produced, either from the researcher's formula or through a modification of the process. Further tests and

improvements in the compound are worked out in Product Development and, with final approval, this department packages a specific amount of the new product for the first clinical trial, which is supervised by the Clinical Investigation Department.

At Parke-Davis, approximately 850 people in laboratories on both sides of the Atlantic and in Australia are engaged in research and product development. Its research facilities are composed of laboratories in Detroit; a research complex at Ann Arbor, Michigan; laboratories at Hounslow, England, a London suburb; and a veterinary research laboratory near Sydney, Australia. The company also provides grants and supports fellowships in many universities and research institutions throughout the world.

Scope of Parke-Davis' research activities encompasses practically every field related to development of new medicinal products. Infectious disease, tropical and parasitic diseases, cancer, cardiovascular and renal diseases, inflammatory disease, and mental illness are some of the major research projects currently in progress.

Parke-Davis' Research Division is composed of the Chemistry, Microbiology, Pharmacology, Clinical Investigation, Product Development and Antibiotic and Microbial Technology departments.

A large organic synthesis group builds endless numbers of new chemical compounds, each a potential key to medical problems such as cancer or tuberculosis, heart or mental disease. Pharmacologists evaluate these compounds and hundreds of others. They seek compounds to relieve pain and inflammation, to lower blood pressure, to alleviate or cure neurological disease, to name a few. They investigate the degenerative disease, increasingly important as man's life span increases.

One group of microbiologists concentrates on the development of vaccines. Another screens organic chemicals and potential antibiotics against a broad spectrum of micro-organisms responsible for human and animal disease.

A sizable staff is attacking the parasitic diseases which affect man -- amebic dysentery, schistosomiasis, malaria, trichomoniasis and worm infections. Virologists

and immunologists cooperate in research on influenza, the "common cold," measles, hepatitis, and other diseases of virus origin.

At Parke-Davis, before a potential drug is finally evaluated in man, biochemists, pathologists, and toxicologists study its properties carefully over a long period of time to determine what happens to the drug in the body and what harmful or toxic effects might result from its use. Then development chemists and pharmacists consider problems related to pharmaceutical elegance. Lastly, taste, appearance, and product stability must be the best attainable.

Clinical Investigation

After a new drug proves promising in laboratory and animal tests, the Clinical Investigation Department (CID) begins its exhaustive studies to determine therapeutic value and proper dosage in humans.

Long experience in this area is reflected in the fact that Parke-Davis, in 1901, established a department of experimental medicine -- the first of its kind on this continent -- to determine the effectiveness and safety of drugs before they were prepared for marketing.

A network of skilled physician-specialists and others on the Clinical Investigation staff now stretches around the globe. Their administrative headquarters are in Ann Arbor, Michigan. Through its CID staff, Parke-Davis presently has studies in progress in practically every country in the world. Staff members, each of whom is responsible for testing certain drugs and, therefore, has an intimate knowledge of everything which has been done in his particular field, work closely with local physicians in the various countries.

Hundreds and sometimes thousands of patients receive each drug before it is pronounced ready for release. Presentation to the government of data about the drug is the next step preceding actual production and distribution to the medical profession.

QUALITY CONTROL

The Principle of Standardization

Among the contributions Parke-Davis has made to the professions of medicine and pharmacy was application of the principle of standardization to medicinal products, in order to assure that every container in every lot has exactly the same strength, or potency.

The first Parke-Davis product to be standardized was "Liquor Ergotae Purificatus," a purified liquid extract of the drug Ergot, which was introduced in 1879. The principle of standardization was not a process that could be patented in any way. The entire industry subsequently adopted chemical standardization of pharmaceutical products and physiological standardization, which was developed in 1897.

Quality is paramount at Parke-Davis.

Today, to insure the safety and purity of each drug product, the Quality Control Division staff meticulously checks every phase of manufacturing. The scope of its activities range from the establishing of specifications for raw materials, seeing to it that such material meets specifications, checking the equipment used in manufacturing, to packaging and labeling the product for marketing.

Just a few of the countless checks made by the division include: representative examination, both empty and filled, of product containers; innumerable assays which tell whether the product and its components are up to specifications; label checking to insure that the label matches the contents of the individual container.

Each product and subsequent batches of that product are under rigid and continuing control. Detailed records are kept of every step before, during, and after manufacturing.

These and other company safeguards insure the quality of each product from manufacturing to the time it reaches the patient.

PRODUCTION AND ENGINEERING

At Parke-Davis, after a new drug has been developed and proven effective, the next step is manufacturing.

The main manufacturing laboratories are located in Detroit. Other U.S. production facilities are at Rochester, Michigan; Holland, Michigan; and Greenwood, South Carolina.

Employing more than 400 people in Canada, Parke-Davis manufacturing laboratories at Brockville, Ontario represent one of the most modern facilities in the industry.

Parkedale, a 611-acre tract of land located just outside of Rochester, Michigan, has become well-known during its more than 50 years as Parke-Davis' development center for poliomyelitis, influenza, adenovirus, and small pox vaccines; antitoxins used against tetanus, gangrene, and diphtheria; plus other experimental work.

At its Holland, Michigan, chemical manufacturing plant, Parke-Davis produces the broad-spectrum antibiotic, Chloromycetin; Benadryl, an antihistamine; Dilantin, for control of epilepsy; and most of the other fine chemicals and intermediates for Parke-Davis Products, and for sale in bulk to others.

A new modern plant for manufacturing of Parke-Davis surgical dressings has been completed at Greenwood, South Carolina, where adhesives, plasters, gauze, bandages, gauze pads, and special dressings are produced. The plant also houses a bleachery and general administration offices for the Surgical Dressings Division.

The company also has manufacturing laboratories in Buenos Aires and Escobar, Argentina; Sydney, Australia; Bornem (Brussels), Belgium; Rio de Janeiro, Brazil; Santiago, Chile; Bogota, Colombia; Hounslow (London), England; Troisdorf, Germany; Bombay, India; Milan, Italy; Sagami-hara and Tokyo, Japan; Mexico City, Mexico; Karachi, Pakistan; Lima, Peru; Carolina (San Juan), Puerto Rico; Carfin, Scotland; Johannesburg, South Africa; Alcala de Henares, Barcelona and Madrid, Spain; and Caracas, Venezuela.

Pharmaceutical manufacturing is complex, due to the number of products involved and to the fact that much of the material used is not stable indefinitely and can lose valuable potency. Careful production planning is necessary to control inventories and coordinate production with sales, so that proper stock levels will be maintained at all times.

Chemists, pharmacists, bacteriologists, biologists, and engineers direct the production and packaging of the biologicals, tablets, capsules, ampoules, syrups, elixirs, extracts, lozenges, surgical dressings, antibiotics, and other medicinal agents that are found in the Parke-Davis catalog.

Engineering

To adequately provide the engineering services required for its world-wide operations, Parke-Davis maintains a three fold engineering force: Engineering, Industrial Engineering, and International Technical Services.

Altogether there are more than 500 employes engaged in the various phases of engineering. So diversified are the activities that their educational background includes almost every phase of engineering, with 53 graduate engineers, a large percentage of whom are registered professional engineers. In addition, engineering employs a maintenance force of qualified craftsmen of various skilled trades; Industrial Engineering, a trained group of statistical control inspectors.

The Engineering Division, broadly speaking, has the prime responsibility of execution in the areas of construction, maintenance, and plant services. To carry out these extensive functions, it has such divisions as area, central, construction, plant, and overseas engineering; maintenance administrative, and shops; plant services; and mechanical development.

All operating divisions of the company, throughout the world, refer requests for equipment and facilities to the Engineering Division for consultation, study, planning, and recommendation as to layouts, type of equipment, etc. On approval, it is again an

engineering responsibility to provide adequate specifications on purchasing orders, for installation of the new equipment, and for construction of new facilities.

Inventory Control

Parke-Davis' investments in inventories of finished products, work in process and raw materials and supplies, represent the largest single category of investments on the company's balance sheet, amounting to more than 20 per cent of total current assets.

It is one of the primary responsibilities of the Inventory Control Division to manage these inventories in such a way as to enable the company to realize the greatest possible return on this large investment. At the same time, this division's responsibility, of equal importance, is to plan carefully for the production and distribution of products so as to provide the best possible service to customers.

Surgical Dressings Division

In addition to the full line of medical and pharmaceutical products, Parke-Davis manufactures and makes available to the medical profession a complete line of surgical dressings products. A comprehensive group of first-aid type surgical dressings are available to the general public in the U.S. through retail drugstores.

More than 70 products in 271 different package sizes are marketed by Parke-Davis, ranging from Rendi-Bandages for minor abrasions to highly specialized, sterile, pre-packaged, surgical dressings products for use in the hospital operating room.

SALES AND DISTRIBUTION

Parke-Davis sells and distributes a full line of medicinal products -- approximately 500 -- in most countries of the world.

Sales are divided about 63 per cent U.S. and 37 per cent in international areas, including Canada.

There are five sales branches in Canada, as follows: Toronto, Ontario; Montreal, Quebec; Winnipeg, Manitoba; Edmonton, Alberta, and Vancouver, British Columbia. The United States has sales branches or depots in 22 cities.

Internationally, there are sales branches, sub-depots or senior representatives in the following cities; Buenos Aires, Cordoba, La Plata, and Rosario, Argentina; Brisbane, Melbourne, and Sydney, Australia; Vienna, Austria; Nassau, Bahamas; Bornem (Brussels), Belgium; Bauru, Belem, Belo Horizonte, Curitiba, Fortaleza, Porto Alegre, Recife, Rio de Janeiro, Salvador, Sao Paulo, and Uberlandia, Brazil; Santiago, Chile; Bogota, Colombia; Cairo, United Arab Republic; Crewe and Hounslow (London), England; Paris, France; Munich, Germany; Hong Kong; Bombay, India; Teheran, Iran; Baghdad, Iraq; Milan and Rome, Italy; Sagamihara and Tokyo, Japan; Beirut, Lebanon; Singapore, Malaysia; Mexico City, Mexico; Wellington, New Zealand; Lagos, Nigeria; Karachi, Pakistan; Colon, Panama; Asuncion, Paraguay; Lima, Peru; Manila, Philippines; Lisbon, Portugal; Carolina (San Juan), Puerto Rico; Cargin (Glasgow), Scotland; Johannesburg, South Africa; Alcala de Henares, Barcelona, and Madrid, Spain; Stockholm, Sweden; Basel and Zurich, Switzerland; Montevideo, Uruguay; and Caracas, Venezuela.

The Parke-Davis Sales Representative

A professional field staff of nearly 100 carefully selected and trained men serves approximately 24,000 physicians, 6,000 retail pharmacies, and 1,100 hospitals in Canada.

Men selected for this important assignment must possess a degree in pharmacy or one of the allied sciences such as bacteriology or pre-medicine. Selection is based on educational background, personal interviews, psychological aptitude tests to determine sales interest and ability, and personal references.

The new sales representative receives initial indoctrination training for a minimum of two weeks in the branch office to which he is assigned. He receives additional in-the-field training in his territory from his field manager. After a period of three to four months, he attends a two-week Recruit Sales Training Conference at

head office headquarters in Montreal. Special training in background medical information, product information, and salesmanship is conducted by head office executive personnel. During the conference, the sales representative is informed of the responsibilities and operations of every division in Parke-Davis. Training is a continuous process throughout his sales career, since he attends branch, regional, and national sales meetings designed to keep him informed of the latest medical developments.

Parke-Davis International

Internationally, the name of Parke-Davis and its products are known almost everywhere. The firm employs approximately 6,500 people abroad, of whom over 1,200 are on the sales and medical service staff, to serve approximately 975,000 physicians, 235,000 pharmacies, and 60,000 hospitals. The policy of the division is to use nationals wherever possible, and more than 50 nationalities are represented.

The volume of business done abroad is a stabilizing influence, and the company's demonstrated ability to operate profitably overseas offers new opportunities for substantial expansion and growth. There are difficulties in international trade but the market potentials are great. For many years, the company has identified itself increasingly with the countries in which it operates and, whenever economically justifiable, has established its own manufacturing facilities there. But no matter where made, Parke-Davis products always must conform with the high quality imposed by the company's quality control procedures.

Actually, Parke-Davis has been selling medicines abroad since the latter part of the 19th century. The biggest International branch is located at Hounslow, just outside London, and was opened in 1891.

In 1965, Parke-Davis acquired three companies in West Germany which specialize in the manufacture and sale of surgical dressings. This acquisition afforded Parke-Davis the opportunity to expand its marketing operations in Europe in a field in which it has had considerable background and experience.

COMMERCIAL DEVELOPMENT

To aid in insuring utilization of its world-wide facilities and personnel, Parke-Davis in 1959 established the Commercial Development Division. Its functions are directed at corporate growth through investment in new products and processes.

The Commercial Development Division (CDD) is primarily a service group which advises the president and basic division heads on the area of product needs; market research information on Parke-Davis and competitive products; the status of product projects; facility requirements relative to such projects; general economic information as related to the pharmaceutical and chemical fields; and market development of non-pharmaceutical products. In addition, it coordinates in a staff capacity all the functions necessary in the development of a product, from the advanced research stages to the introduction on the market.

Promotional Activities

In this country and abroad, the Parke-Davis sales efforts are augmented by promotion materials.

"Therapeutic Notes," a medical journal edited, published, and distributed as a continuous service to the medical profession since 1894, is distributed to most of the physicians in Canada and the United States. There are also Spanish, Portuguese, French, Italian, Swedish, British, and Australian editions.

"Patterns of Disease," gives the latest statistical data on selected diseases, and regularly correlates related health facts into timely articles.

Other company periodicals include "The Firing Line," published for the U.S. Sales staff; "Parke-Davis International," and "The Parke-Davis International News" for the International staff; and the "P-D Review," which goes to all employees.

The company has representatives and exhibits at many medical, pharmaceutical, and hospital meetings during the year.

More than 10,000 professional people, including many from different parts of the world, annually visit the home laboratories in Detroit. They include physicians, pharmacists, nurses, and medical and pharmacy students.

Parke-Davis has sponsored institutional advertisements in behalf of the physician and the pharmacist in U.S. magazines since 1928 and, more recently, in many international areas. In addition, the company advertises its products in more than 250 medical and pharmaceutical professional journals here and abroad.

- 30 -

FROM -
Parke, Davis & Company, Ltd.
5910 Côte de Liesse Road
Montreal 9, Quebec, Canada
A/C: 514 - 748-6301

FOR IMMEDIATE USE

1966

CENTENNIAL FILLER FACTS

Parke, Davis & Company was founded October 26, 1866, in Detroit, Michigan when Hervey C. Parke became a partner in a small drug manufacturing business owned by physician-pharmacist Dr. Samuel P. Duffield. George S. Davis, a dynamic salesman, joined the firm the next year. Dr. Duffield withdrew from the company shortly thereafter and, in 1871, the name was changed to its present, Parke, Davis & Company.

- O -

First manufacturing facilities outside the United States were established at Walkerville, Ontario, in 1887. Canadian Manufacturing operations were transferred to Brockville, Ontario in 1956.

- O -

Parke, Davis & Company declared its first dividend in 1878 and has paid out at least one dividend each year since that time. Only 12 other firms listed on the New York Stock Exchange have paid at least annual dividends for a longer period of time.

- O -

In 1879, thirteen years after its founding, Parke, Davis & Company developed the principle of chemical standardization. This principle assured that the amount of chemical in each prescription was identical. Today, in highly refined form, the reputation of drug companies is tied to this principle.

- O -

2 - CENTENNIAL FILLER FACTS (Parke-Davis)

In 1898 a branch was opened in Montreal and a depot in Toronto. The Winnipeg depot commenced operations in 1919.

- O -

Development of drugs from botanical sources ... plants, roots, herbs ... was the main thrust of Parke, Davis & Company efforts during its early years. Expeditions were sent to the West Indies, Central and South America in search of previously undiscovered materials. Two of the products introduced at that time -- Chlor-Anodyne, to relieve colic and first introduced in 1874, and Cascara Sagrada, a cathartic first introduced in 1877 -- are still listed in the Parke-Davis Catalog.

- O -

There are now 5 sales branches in Canada: Montreal, Toronto, Winnipeg, Edmonton and Vancouver. The Canadian Head Office is located in Montreal. Clifford A. Rogers, a native of Saskatchewan, is Vice President and Managing Director.

- O -

Parke, Davis & Company Vice Chairman of the Board Dr. A. Smith was born in Belleville, Ontario, and President H. W. H. Burrows was born in Toronto.

- O -

The first commercial biological laboratory in America was established by Parke, Davis & Company in Detroit in 1894.

- O -

Its first operations outside of North America were established in London by Parke, Davis & Company in 1891. Offices in Bombay, India, were opened in 1899,

3 - CENTENNIAL FILLER FACTS (Parke-Davis)

followed by Sydney, Australia, 1902; Buenos Aires, Argentina, 1915; Havana, Cuba, 1915 (expropriated by the Castro government in 1962); and Rio de Janeiro, Brazil, 1925, to name a few international branches.

- 0 -

Parke, Davis & Company was the first commercial firm to produce diphtheria antitoxin in the United States in 1895.

- 0 -

Parke, Davis & Company's research staff world-wide is composed of 450 technical and 400 supporting people. The majority are employed at the firm's laboratories at Detroit or Ann Arbor, Michigan. Others are employed at Parke-Davis' Laboratories in Hounslow, England, a London suburb, or at its veterinary research laboratory near Sydney, Australia.

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Eight presidents have served Parke, Davis & Company since its founding in 1866. Hervey C. Parke was the first president and served in that capacity until his death in 1899. Theodore D. Buhl succeeded Parke and served as head of the company until 1907 when Frank G. Ryan took over as chief executive. Ryan died in 1920 and was succeeded in the presidency by James E. Bartlett. A year later, Oscar W. Smith was elected president. He directed the company for 17 years until his death in 1938. Dr. A. W. Lescohier became president and served until his retirement in April, 1951, when Harry J. Loynd took over management of the world-wide firm. In December, 1965, Loynd was elected chairman of the Parke-Davis Board and chief executive officer, and Harold W. H. Burrows a native of Toronto, Ontario was elected president and chief operating officer.

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4 - CENTENNIAL FILLER FACTS (Parke-Davis)

Thirty-five years after its founding, Parke, Davis & Company in 1901 created the Department of Experimental Medicine, the first organized department for subjecting medicinal agents to clinical proof before their public introduction. Today, hundreds of specialists throughout the world cooperate with the company in this program of clinical investigation.

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Epinephrine, the first hormone to be isolated, was obtained in Parke, Davis & Company's Detroit laboratories in 1901 and introduced that same year to the medical profession under the name Adrenalin.

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The first building constructed by industry anywhere in America devoted to scientific research was completed by Parke, Davis & Company in Detroit in 1902.

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